

|   |           |  |   |
|---|-----------|--|---|
| Your first name and initial<br><b>[1]</b>   |           | Last name  | Your social security number<br>                               |
| If a joint return, spouse's first name and initial<br><b>[1]</b>  |           | Last name  | Spouse's social security number<br>                           |
| Present home address - number and street, rural route<br><b>[2]</b>   |           | Apt. No.   | é <b>IMPORTANT!</b> é<br>You must enter<br>your SSN(s) above. |
| City, town or post office   |           | Daytime telephone<br>( )   |   |
| State   |           | ZIP code   | For DOR use only  |
| <b>[3]</b>  |           | Home telephone <b>[94]</b><br>( )  |   |
| Filing Status   | <b>4</b>  | Married filing joint return  |   |
|   | <b>5</b>  | Head of household - <i>name of qualifying dependent</i> :  |   |
|   | <b>6</b>  | Married filing separate return. Enter spouse's social security number above and full name here. ➤  |   |
|   | <b>7</b>  | Single   |   |
|   | <b>8</b>  | Age 65 or over (you and/or spouse)   |   |
| Exemptions  | <b>9</b>  | Blind (you and/or spouse)  |   |
|   | <b>10</b> | Dependents. <i>From page 2, line A2 - do not include self or spouse.</i>   |   |
|   | <b>11</b> | Qualifying parents and ancestors. <i>From page 2, line A5.</i>   |   |
|   |           | <b>[88]</b>  |   |
|   |           | <b>[81]</b>  |   |
|   |           | <b>[82]</b> CHECK ONE if filing under a federal extension: 4 month federal extension <b>82 D</b> <input type="checkbox"/> 6 month federal extension <b>82 F</b> <input type="checkbox"/> |   |
| <b>Residency Status (Check one)</b> <b>12</b> <input type="checkbox"/> Part-year resident other than active military <b>13</b> <input type="checkbox"/> Part-year resident active military  |           |  |   |
| <b>14</b> Federal adjusted gross income (from your federal return) .....  |           | <b>14</b>  | <b>00</b>   |
| <b>15</b> Arizona income (from page 2, line B21) .....  |           | <b>15</b>  | <b>00</b>   |
| <b>16</b> Additions to income (from page 2, line C25) .....   |           | <b>16</b>  | <b>00</b>   |
| <b>17</b> Add lines 15 and 16 .....   |           | <b>17</b>  | <b>00</b>   |
| <b>18</b> Elective subtraction of 1999 federal retirement contributions. <i>See instructions</i> .....  |           | <b>18</b>  | <b>00</b>   |
| <b>19</b> Subtractions from income (from page 2, line D37) .....  |           | <b>19</b>  | <b>00</b>   |
| <b>20</b> Arizona adjusted gross income. <i>Subtract lines 18 and 19 from line 17</i> .....   |           | <b>20</b>  | <b>00</b>   |
| <b>21</b> Deductions. <i>Check box and enter amount. See instructions, page 13.</i> <b>21 I</b> <input type="checkbox"/> ITEMIZED <b>21 S</b> <input type="checkbox"/> STANDARD ....  |           | <b>21</b>  | <b>00</b>   |
| <b>22</b> Personal exemptions. <i>See page 14 of the instructions</i> .....   |           | <b>22</b>  | <b>00</b>   |
| <b>23</b> Arizona taxable income. <i>Subtract lines 21 and 22 from line 20</i> .....  |           | <b>23</b>  | <b>00</b>   |
| <b>24</b> Compute the tax using Tax Rate Table X or Y .....   |           | <b>24</b>  | <b>00</b>   |
| <b>25</b> Tax from recapture of credits from Arizona Form 301, line 28 .....  |           | <b>25</b>  | <b>00</b>   |
| <b>26</b> Subtotal of tax. <i>Add lines 24 and 25</i> .....   |           | <b>26</b>  | <b>00</b>   |
| <b>27</b> Clean Elections Fund Tax Reduction. <i>See instructions, page 15.</i> <b>27 1</b> <input type="checkbox"/> YOURSELF <b>27 2</b> <input type="checkbox"/> SPOUSE   |           |  |   |
| <b>28</b> Tax reduction. <i>Complete worksheet on page 15 of the instructions</i> .....   |           | <b>28</b>  | <b>00</b>   |
| <b>29</b> Reduced tax. <i>Subtract line 28 from line 26</i> .....   |           | <b>29</b>  | <b>00</b>   |
| <b>30</b> Family income tax credit from worksheet on page 16 of the instructions .....  |           | <b>30</b>  | <b>00</b>   |
| <b>31</b> Credits from Arizona Form 301, line 53 .....  |           | <b>31</b>  | <b>00</b>   |
| <b>32</b> Credit type. <i>Enter form number of each credit claimed</i> .....  |           | <b>32</b>  | <b>[3] [3] [3] [3] [3] [3]</b>                                |
| <b>33</b> Subtract lines 30 and 31 from line 29. <i>If the sum of lines 30 and 31 is more than line 29, enter zero</i> .....  |           | <b>33</b>  | <b>00</b>   |
| <b>34</b> Clean Elections Fund Tax Credit. <i>From worksheet on page 18</i> .....   |           | <b>34</b>  | <b>00</b>   |
| <b>35</b> Balance of tax. <i>Subtract line 34 from line 33. If line 34 is more than line 33, enter zero.</i> .....  |           | <b>35</b>  | <b>00</b>   |
| <b>36</b> Arizona income tax withheld during 1999 .....   |           | <b>36</b>  | <b>00</b>   |
| <b>37</b> Arizona estimated tax payments for 1999 .....   |           | <b>37</b>  | <b>00</b>   |
| <b>38</b> Amount paid with 1999 Arizona extension request (Form 204) .....  |           | <b>38</b>  | <b>00</b>   |
| <b>39</b> Total payments. <i>Add lines 36, 37 and 38</i> .....  |           | <b>39</b>  | <b>00</b>   |
| <b>40</b> TAX DUE. <i>If line 35 is larger than line 39, enter amount of tax due. Skip lines 41, 42 and 43</i> .....  |           | <b>40</b>  | <b>00</b>   |
| <b>41</b> OVERPAYMENT. <i>If line 39 is larger than line 35, enter amount of overpayment</i> .....  |           | <b>41</b>  | <b>00</b>   |
| <b>42</b> Amount of line 41 to be applied to 2000 estimated tax .....   |           | <b>42</b>  | <b>00</b>   |
| <b>43</b> Balance of overpayment. <i>Subtract line 42 from line 41</i> .....  |           | <b>43</b>  | <b>00</b>   |
| Voluntary gifts to:   |           |  |   |
| Aid to Education Fund (Enter entire refund only)  |           | <b>44</b>  | <b>00</b>   |
| Citizens Clean Elections Fund   |           | <b>46</b>  | <b>00</b>   |
| Domestic Violence Shelter Fund  |           | <b>48</b>  | <b>00</b>   |
| Special Olympics Fund   |           | <b>50</b>  | <b>00</b>   |
| Arizona Wildlife Fund   |           | <b>45</b>  | <b>00</b>   |
| Child Abuse Prevention Fund   |           | <b>47</b>  | <b>00</b>   |
| Neighbors Helping Neighbors Fund  |           | <b>49</b>  | <b>00</b>   |
| Political Gift  |           | <b>51</b>  | <b>00</b>   |
| <b>52</b> Check only one if making a political gift: <b>52 1</b> <input type="checkbox"/> Democratic <b>52 2</b> <input type="checkbox"/> Libertarian <b>52 3</b> <input type="checkbox"/> Reform <b>52 4</b> <input type="checkbox"/> Republican |           |  |   |
| <b>53</b> Estimated payment penalty and interest .....  |           | <b>53</b>  | <b>00</b>   |
| <b>54</b> Check applicable box(es). <b>54 1</b> <input type="checkbox"/> Annualized/Other <b>54 2</b> <input type="checkbox"/> Farmer or fisherman <b>54 3</b> <input type="checkbox"/> Form 221 attached   |           |  |   |
| <b>55</b> MSA withdrawal penalty .....  |           | <b>55</b>  | <b>00</b>   |
| <b>56</b> Total of lines 44, 45, 46, 47, 48, 49, 50, 51, 53 and 55 .....  |           | <b>56</b>  | <b>00</b>   |
| <b>57</b> REFUND. <i>Subtract line 56 from line 43. If less than zero, enter amount owed on line 58</i> .....   |           | <b>57</b>  | <b>00</b>   |
| <b>58</b> AMOUNT OWED. <i>Add lines 40 and 56. Include SSN on payment</i> <span style="border: 1px solid black; padding: 2px;">Make Checks Payable To: Arizona Department of Revenue</span>   |           | <b>58</b>  | <b>00</b>   |

## Form 140PY (1999) Page

PART A  
When claiming dependents do not list yourself or

|    |   |           |                        |              |  |
|----|---|-----------|------------------------|--------------|--|
| A1 | List children and other dependents. If more space is needed, attach a separate sheet. |           | Social security number | Relationship | No. of months lived in your home in 1999 |
|    | First name  | Last name |                        |              |  |
|    |   |           |                        |              |  |
|    |   |           |                        |              |  |
|    |   |           |                        |              |  |

A2 Enter total number of persons listed in A1 here and on the front of this form, box 10. TOTAL **A2**

A3 Enter the names of the dependents age 65 or over listed above who do not qualify as your dependent on your federal return:

A4 List qualifying parents and ancestors. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor, see pages 4 and 5 of the instructions.

|            |           |                        |              |  |
|------------|-----------|------------------------|--------------|--|
| First name | Last name | Social security number | Relationship | No. of months lived in your home in 1999 |
|            |           |                        |              |  |
|            |           |                        |              |  |

A5 Enter total number of persons listed in A4 here and on the front of this form, box 11. TOTAL **A5**

PART B  
Arizona Percent of Total Income

|  | 1999 FEDERAL<br>Amounts from federal return |    | 1999 ARIZONA<br>Amounts only |    |
|--|---|----|------------------------------|----|
| B6 Dates of Arizona residency: From _____ To _____<br>List other state(s) of residency _____                   |   |    |                              |    |
| B7 Wages, salaries, tips, etc. ....  | B7  | 00 |                              | 00 |
| B8 Interest .....  | B8  | 00 |                              | 00 |
| B9 Dividends .....   | B9  | 00 |                              | 00 |
| B10 Arizona income tax refunds .....   | B10   | 00 |                              | 00 |
| B11 Alimony received .....   | B11   | 00 |                              | 00 |
| B12 Business income or (loss) from federal Schedule C .....  | B12   | 00 |                              | 00 |
| B13 Gain or (loss) from federal Schedule D .....   | B13   | 00 |                              | 00 |
| B14 Rents, royalties, partnerships, estates, trusts, small business corporations, from federal Schedule E .... | B14   | 00 |                              | 00 |
| B15 Other income reported on your federal return .....   | B15   | 00 |                              | 00 |
| B16 Total income. Add lines B7 through B15 .....   | B16   | 00 |                              | 00 |
| B17 Total IRA deduction .....  | B17   | 00 |                              | 00 |
| B18 Other federal adjustments. Attach your own schedule .....  | B18   | 00 |                              | 00 |
| B19 Total adjustments. Add lines B17 and B18 .....   | B19   | 00 |                              | 00 |
| B20 Federal adjusted gross income. Subtract line B19 from line B16 in FEDERAL Column .....                     | B20   | 00 |                              | 00 |

PART C  
Addition

|   |     |    |
|---|-----|----|
| B21 Arizona income. Subtract line B19 from line B16 in ARIZONA Column. Enter here and on the front of this form line 15 ..... | B2  | 00 |
| B22 Arizona percentage. Divide line B21 by line B20 and enter the result (not over 100%) .....                                | B2  | %  |
| C23 Early withdrawal of Arizona Retirement System contributions .....   | C23 | 00 |
| C24 Other additions to income. See instructions and attach your own schedule .....  | C24 | 00 |
| C25 Total. Add lines C23 and C24. Enter here and on the front of this form, line 16 .....                                     | C25 | 00 |

PART D  
Subtraction

|  |     |    |  |  |
|--|-----|----|--|--|
| D26 Exemption: Age 65 or over. Multiply number in box 8, page 1, by \$2,100 .....                                    | D26 | 00 |  |  |
| D27 Exemption: Blind. Multiply number in box 9, page 1, by \$1,500 .....   | D27 | 00 |  |  |
| D28 Exemption: Dependents. Multiply number in box 10, page 1, by \$2,300 .....                                       | D28 | 00 |  |  |
| D29 Exemption: Qualifying parents and ancestors. Multiply number in box 11, page 1, by \$10,000 .....                | D29 | 00 |  |  |
| D30 Total exemptions. Add lines D26 through D29 .....  | D30 | 00 |  |  |
| D31 Multiply line D30 by percentage on line B22 and enter the result .....   | D31 | 00 |  |  |
| D32 Interest on U.S. obligations, such as U.S. Savings Bonds and Treasury Bills included in the ARIZONA column ..... | D32 | 00 |  |  |
| D33 Arizona state lottery winnings included on line B15 in ARIZONA column (up to \$5,000 only) .....                 | D33 | 00 |  |  |
| D34 U.S. social security or Railroad Retirement Act benefits included in your ARIZONA income .....                   | D34 | 00 |  |  |
| D35 Alternative fuel vehicles and refueling equipment .....  | D35 | 00 |  |  |
| D36 Other subtractions. See instructions and attach your own schedule. ....  | D36 | 00 |  |  |
| D37 Total. Add lines D31 through D36. Enter here and on the front of this form, line 19 .....                        | D37 | 00 |  |  |

E38 Last name(s) used in prior years if different from name(s) used in current year.

I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete.

Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

|                             |                      |   |                     |
|-----------------------------|----------------------|---|---------------------|
| Please Sign Here            | Your signature       | Date                                      | Occupation          |
|                             | Spouse's signature   | Date                                      | Spouse's occupation |
| Paid Preparer's Information | Preparer's signature | Firm's name (preparer's if self-employed) |                     |
|                             | Preparer's TIN       | Date                                      | Preparer's address  |

If you are sending a payment with this return, mail to: Arizona Department of Revenue, PO Box 52016, Phoenix AZ 85072-2016.

If you are expecting a refund, or owe no tax, or owe tax but are not sending a payment, mail to: Arizona Department of Revenue, PO Box 52138, Phoenix AZ 85072-2138.